

# STRATEGIC PLAN 2013-2015





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#### A MESSAGE FROM THE DIRECTOR

Welcome to our 2013-2015 VA Palo Alto Health Care System (VAPAHCS) Strategic Plan.

Our health care system embarked on a journey of continuous improvement in fiscal year (FY) 2010 with the launch of our first three-year strategic plan. It was an ambitious plan that challenged us all to go above and beyond. We continue our efforts in this new plan that establishes our goals and how we will achieve them in six priority areas: People, Access, Quality, Safety, Innovation, and Stewardship.

As the people who serve our Veterans every day, you have been instrumental in helping to shape our strategic direction through your feedback. The motto you collectively chose I am extremely grateful to all of you for your commitment to our Veterans.

to honor our commitment is *Serving those who Served*. This phrase is greater than a string of words; it represents the passion of nearly 8,000 staff and volunteers to provide the absolute best care to our nation's Veterans. As we prepare for the next three years of our journey, my hope is for you all to understand our strategic goals and to recognize your important contributions in achieving them.

VAPAHCS is nationally and internationally recognized as a leader in the Veterans Health Administration (VHA). This is an awesome responsibility—and we are prepared for the challenge. I am extremely grateful to all of you for your commitment to our Veterans. These next three years promise to be exciting, and I am proud to be on this journey with you!

Sincerely, Melman

**Lisa Freeman** | Director, VA Palo Alto Health Care System



#### **EXECUTIVE SUMMARY**

This new strategic plan builds upon the progress we have made over the last three years and establishes a vision Veterans for achieving our goals over the next three years Continuous Improvement from FY2013-2015. Veteran-Cennshar Vision By looking at our strengths; To be the benchmark areas for improvement; of excellence and value and the political, economic, in health care social, and technological environment, we have identified Mission where we need to go and Honor America's Veterans by how we will get there. providing exceptional health care that improves their health and well-being The foundation of our strategic plan is the VHA **Priorities** mission, vision, and values that honor our nation's Veterans, who are the focus Innovation Stewardship of everything we do. Based People Access Quality Safety on that foundation, our strategic priorities are Core Values People, Access, Quality, Integrity A Commitment A Advocacy A Respect A Excellence Safety, Innovation, and Stewardship. Providing Veteran-Centered Care and engaging in Served those who Served Continuous Improvement are the guiding principles that shape our overall approach to how we will deliver outstanding health care and

achieve the goals set forth in this plan.

#### **OUR SIX PRIORITIES**



Over the next three years, we want to more tangibly demonstrate the engagement of our workforce in understanding our strategic goals and their important contributions toward achieving them. We want to develop and recognize people who are not only technically competent and can provide world-class care and services, but who love VAPAHCS and its Veterans.



We are committed to fostering a safe environment for our workforce, Veterans, and visitors.

This includes a physically safe environment that is free from hazards as well as a psychologically safe environment that promotes a culture of No Fear.



Our commitment to Veterans and employees is to provide the right service, in the right place, at the right time. This encompasses both internal and external access, as external access to health care and internal access to administrative services are equally critical to ensuring the best care for our Veterans.



In promoting a culture of continuous **improvement**, we seek to ensure that core processes of health care delivery are well defined, deeply understood, and made better every day. Also, as one of VHA's largest research programs, we will continue to be at the forefront of genomics research and further enhance our robust research program.



In this era of health care reform, we know our Veterans have a choice. Therefore, it is imperative that we provide the highest quality of care that is personalized to their unique needs, proactive to anticipate any future needs, patient-driven to encourage Veteran involvement, and ultimately yields improved health outcomes.



Each of us plays an important role in being good stewards of our nation's resources when performing our duties. Whether it is wisely using financial resources, efficiently using appointment slots, or eliminating unnecessary steps, we want to align our resources in such a way as to provide the best value to our Veterans.

#### Department of Veterans Affairs FY2011-2015 VA Palo Alto Health Care System FY2013-2015 STRATEGIC ALIGNMENT Veterans Health Administration FY2013-2018 Increase Veteran enrollment 8 Improve the quality Become and accessibility of Achieve a learning health care, benefits, measurable organization 5 and memorial services improvements Provide while optimizing in health personalized. value outcomes proactive, and patient-driven health care 9 Increase Veteran Enhance client satisfaction with research health, education, training, program Provide Veterans 3 and burial benefits personalized, Improve and services proactive, patientservice delivery driven health 7 care Strengthen Raise readiness emergency to provide services preparedness and protect people 6 and assets continuously and in time of Foster safety culture 10 Align resources to Improve internal deliver sustained customer satisfaction value to Align Veterans resources to Enhance and support services to deliver sustained workforce achieve mission performance development value to and make VA an employer and Veterans 2 of choice by investing education Promote workforce engagement and empower-

ment

### SERVICE AREA OVERVIEW





Data is for the South Coast Market, which includes 9 counties shown in highlighted map above. Data does not include Alameda County,

2010	2011	2012	2013	2014	2015
218,621	205,453	197,760	190,272	183,192	176,502
74,463	75,791	85, 844	77,257	77,391	77,226
34.06%	36.89%	43.41%	40.60%	42.25%	43.75%
	218,621 74,463	218,621 205,453 74,463 75,791	218,621     205,453     197,760       74,463     75,791     85,844	218,621     205,453     197,760     190,272       74,463     75,791     85, 844     77,257	218,621     205,453     197,760     190,272     183,192       74,463     75,791     85, 844     77,257     77,391

Data Source: VHA Support Service Center (VSSC)

**PROJECTED** 

#### **FACILITIES**

The VA Palo Alto Health Care System (VAPAHCS) is part of the VA Sierra Pacific Network (VISN 21), which includes facilities in California, Nevada, Hawaii, the Philippines, and several Pacific Islands.



Menlo Park Division



Palo Alto Division



Livermore Division

VAPAHCS consists of three inpatient divisions located in Palo Alto, Menlo Park, and Livermore. VAPAHCS also has seven Community-Based Outpatient Clinics (CBOCs): San Jose, serving Santa Clara County; Capitola, serving Santa Cruz County; Monterey, serving Monterey and San Benito Counties; Stockton, serving San Joaquin County; Modesto, serving Stanislaus County; Sonora, serving Calaveras and Tuolumne Counties; and Fremont, serving southern Alameda County. Additionally, there are four Vet Centers located in Redwood City, Santa Cruz, Modesto, and San Jose.

VAPAHCS is a tertiary care facility classified as a Complexity Level 1A Facility. We are a teaching hospital—affiliated with Stanford University School of Medicine—providing a full range of patient care services using state-of-the art technology, education, and research.

VAPAHCS has 808 operating beds, including 52 internal medicine, 42 surgical, 72 acute psychiatry, 43 spinal cord injury, 27 blind rehabilitation, 30 traumatic brain injury, 172 homeless domiciliary, 360 skilled nursing home, and 10 psychosocial residential rehabilitation treatment program beds.

VAPAHCS is home to a variety of regional treatment centers, including Spinal Cord Injury Center; Polytrauma Rehabilitation Center; Western Blind Rehabilitation Center; Homeless Veterans Rehabilitation Program; and Men's and Women's Trauma Recovery Programs.

VAPAHCS' Research Program is the second largest in VHA with annual funding of more than \$58M. Over 180 principal investigators manage approximately 500 research projects at VAPAHCS at any given time. VAPAHCS successfully maintains strong research programs in each of VHA Office of Research and Development (ORD) program areas of Clinical Science Research and Development (R&D), Basic Laboratory R&D, Rehabilitation R&D and Health Services R&D. VAPAHCS' Research Centers include: (1) Cooperative Studies Program Coordinating Center; (2) Health Services Research and Development (HSR&D) Center for Health Care Evaluation; (3) Rehabilitation Research and Development (RR&D) Center for Tissue Regeneration, Repair, and Restoration; (4) Health Economics Resource Center (HERC); and (5) Congestive Heart Failure (CHF) QUERI Center. In addition, VAPAHCS hosts several non-ORD funded centers that

contribute to a rich research environment, including Geriatric Research, Education and Clinical Center (GRECC), Mental Illness Research, Education and Clinical Center (MIRECC), War Related Illness and Injury Study Center (WRIISC), Program

# We are a teaching hospitalaffiliated with Stanford University School of Medicine

Evaluation Resource Center (PERC), National Center for Post-Traumatic Stress Disorder (NC-PTSD), and Office of Public Health Surveillance and Research (OPHSR).

In FY2012, almost 86,000 Veterans enrolled in our health care system; we served over 64,000 of them as patients. VAPAHCS' FY2012 operating budget, including special program funding, was \$891M, which supported over 3,800 full-time employees.



San Jose CBOC







Monterey CBOC



Sonora CBO



Stockton CBOC



Fremont CBOC

		OBJE				OBJE
get 1	Our people—the emp trainees, contractors Veterans—are our m	, and	es, volunteers, students, others who serve our aportant resource.	FETA	The safety of our Ve	erans
	Enhance workforce development and	1.1	Succession planning		6 Foster safety	6.1
	education	1.2	Customer service training		culture	
		1.3	Workforce development		Strengthen emergency	7.1
	Promote workforce	2.1	Reward & recognition		preparedness	
	engagement and empowerment	2.2	Workforce satisfaction			
		2.3	Communication & engagement	VA	We embrace continu	ous le
			<u> </u>	) Q	and research as fund	
A I d	We are committed to and fellow employed at the right time.	proves the	iding our Veterans right service, in the right place,		8 Become a learning organization	8.1
	Improve service	3.1	Timeliness		Enhance research	9.1
ľ	delivery	3.2	Virtual encounters		program	
						9.2
		3.3	Internal & external access			9.2
	Increase Veteran enrollment	3.3 4.1	Internal & external access  Outreach	FO SHIP	Each of us carries the	e respo
(	/ /I \			FO SALL	of our nation's resources to	e respo
	enrollment	4.1	Outreach	EO AHIP	of our nation's resou	e respo
	enrollment	4.1		FO SAIL	of our nation's resources to deliver sustained	e respo
	Our mission is to proto all Veterans we see	4.1	Outreach	PO.TE	of our nation's resources to deliver sustained	e respo
	Our mission is to proto all Veterans we se	4.1	Outreach  exceptional health care		of our nation's resources to deliver sustained	e respo

Patient satisfaction

SPETA	The safety of our Veterans and workforce is essential every day.					
	6 Foster safety culture	6.1	Physical & psychological safety			
	Strengthen emergency preparedness	7.1	Emergency management competency			
NOVA JOS	We embrace continuous learning, improvement, and research as fundamental to our ongoing success.					
	Become a learning	8.1	Continuous improvement			

ponsibility of ensuring the best use in performing our duties.

Research program management

Genomics Research Center of Excellence

Align resources to deliver sustained	10.1	Resource allocation
value to Veterans	10.2	Balanced scorecard



Goal: Invest in building an engaged and continuously developing workforce.

Measure of success: 100% of employees complete a Personal Development Plan using a standardized template in conjunction with their mid-year performance evaluation.



Goal: Provide a physically and psychologically safe environment for all our patients, visitors, and workforce.

Measure of success: Decrease the number of falls and assaults at VAPAHCS from FY12 levels—decrease inpatient fall rate to 3.5/1000 bed days of care, visitor and workforce falls by 10%, and all assaults by 10%.



Goal: Improve internally and externally focused customer service processes.

Measure of success: 100% of services identify and develop area of focus to deliver improved access to care for Veterans or to improve services for employees.



Goal: Develop a culture of continuous improvement.

Measure of success: 100% of VAPAHCS leaders who attend process improvement training complete deliverables and engage front-line employees in continuous improvement.



**Goal:** Engage in activities that improve the patient experience as measured by satisfaction surveys.

Measure of success: Score at or above the 75th percentile nationally on the Inpatient HCAHPS Overall Hospital Rating and on the Outpatient SHEP Provider Rating.



Goal: Be good stewards of our nation's resources to deliver the most value to our Veterans.

Measure of success: 100% of services determine standard data to be reviewed and acted upon, incorporating practices of a datadriven organization, such as tracking and trending.

# **PEOPLE**

Our people—the employees, volunteers, students, trainees, contractors, and others who serve our Veterans—are our most important resource.





## GOAL 1 Enhance workforce development and education

- MEASURE OF SUCCESS -

	OBJECTIVE	FY13	FY14	FY15
1.1	Succession Planning Support the identification and development of internal people to fill key leadership positions, ensuring the sustainability of our organization.	100% of services update their Succession Plans to a standard format.	TBD	TBD
1.2	Customer Service Training Design a VAPAHCS-specific curriculum to train the workforce in customer service excellence.	Develop and roll out VAPAHCS-specific customer service training to 100% of trainers, managers/supervisors, and Q4 new employees.	100% of workforce trained on VAPAHCS-specific customer service training.	TBD
1.3	Workforce Development Invest in building an engaged and continuously developing workforce.	FY13 Organizational Goal 100% of employees complete a Personal Development Plan using a standardized template in conjunction with their mid-year performance evaluation.	Develop and implement VAPAHCS-specific quarterly leadership training program.	Build and improve upon VAPAHCS-specific quarterly leadership training program.









# **PEOPLE**

Our people—the employees, volunteers, students, trainees, contractors, and others who serve our Veterans—are our most important resource.



# GOAL 2 Promote workforce engagement and empowerment

\_\_\_\_\_ MEASURE OF SUCCESS

	OBJECTIVE	FY13	FY14	FY15
2.1	Reward & Recognition  Make the celebration of employee contributions part of VAPAHCS culture.	Establish VAPAHCS reward and recognition multi-disciplinary team and create a comprehensive program linked to strategic initiatives and performance measures.	Increase % of services from FY13 that use opportunities for reward and recognition.	Increase % of services from FY14 that use opportunities for reward and recognition.
			Increase % of employees from FY13 who are recog- nized for contributions that positively impact the health care system.	Increase % of employees from FY14 who are recog- nized for contributions that positively impact the health care system.
2.2	Workforce Satisfaction Analyze available survey data and act upon opportunities for improvement as part of our	All Employee Survey - Overall Satisfaction Score: Improve from FY12: 3.97.	Improve from FY13.	Improve from FY14.
	commitment to our people.	NDNQI RN Satisfaction Survey: Increase the # of units/measures that outperform the national benchmark from FY12.	Increase the # of units/ measures that outperform the national benchmark from FY13.	Outperform the national benchmark in the majority of units, for the majority of measures.
		Learners Perception Survey: Reach target 84%.	Improve from FY13.	Improve from FY14.
		Develop survey to measure student and volunteer satisfaction.	Improve from FY13.	Improve from FY14.
2.3	Communication & Engagement Communicate and educate workforce on strategic priorities and continuous improvement journey to increase awareness, understanding, and participation.	100% of services have presentation by Leadership about FY13-15 Strategic Priorities and Goals.	TBD	TBD



# **ACCESS**

We are committed to providing our Veterans and fellow employees the right service, in the right place, at the right time.



### GOAL 3 | Improve service delivery

\_\_\_\_\_ MEASURE OF SUCCESS

	OBJECTIVE	FY13	FY14	FY15
3.1	Timeliness Provide our Veterans the right care, in the right place, at the right time.	Meet primary and specialty care access measures.	TBD	TBD
	in the right place, at the right time.	Develop value stream metrics for Inpatient Medicine.	TBD	TBD
3.2	Virtual Encounters Increase use of virtual care modalities in lieu of face-to-face encounters for the convenience of Veterans.	100% of clinical services complete a self- assessment for providing non-face-to-face care and a timeline for implementing identified modalities. Offer Clinical Video Telehealth directly to the Veteran's home.	75% of clinical services offer a full complement of clinically appropriate nonface-to-face modalities.	100% of clinical services offer a full complement of clinically appropriate non- face-to-face modalities.
3.3	Internal & External Access Improve internally and externally focused customer service processes.	FY13 Organizational Goal 100% of services identify and develop area of focus to deliver improved access to care for Veterans or to improve services for employees.	TBD	TBD

# GOAL (4)

### Increase Veteran enrollment

MEASURE OF SUCCESS

	OBJECTIVE	FY13	FY14	FY15
4.1	Outreach Coordinate outreach activities and increase vested Veterans to expand the reach of those	Decrease non-vested rate to 2.4% (national average).	Decrease non-vested rate to 2.25%.	Decrease non-vested rate to 2%.
	we serve.	Increase # of uniques by 2%.	Increase # of uniques by 2%.	Increase # of uniques by 2%.





Our mission is to provide exceptional health care to all Veterans we serve.



# GOAL 5 Provide personalized, proactive, and patient-driven health care

\_\_\_\_\_ MEASURE OF SUCCESS

	OBJECTIVE	FY13	FY14	FY15
5.1	Health Outcomes Engage in continuous improvement activities to achieve improved health outcomes as measured by key performance metrics.	Conduct 20 observations for hand hygiene per month per identified area and score ≥85% in compliance.	TBD	TBD
		Reduce 30-day readmission rates from 13% to 8%. Reduce 90-day readmission rates from 21% to 18%.	TBD	TBD
5.2	Veteran-Centered Care Partner with each Veteran to create a personalized, proactive strategy to optimize health and well-being, while providing state-of-theart disease management	On admission to CLC, 75% of Veterans have goals of care documented in a standardized format within 3 business days by a CLC clinician.	Expand Veteran involve- ment in goal setting and decision-making to other areas of health care system.	TBD
	art disease management.	Pilot real-time patient feedback in inpatient, outpatient, and CLCs to provide patient-driven health care.	Expand program to other areas of health care system and develop mechanism for linking patient feedback to improvement efforts.	Expand program to all areas of health care system and consistently link patient feedback to improvement efforts.
5.3	Patient Satisfaction Engage in activities that improve the patient experience as measured by satisfaction surveys.	FY13 Organizational Goal Score at or above the 75th percentile nationally on the Inpatient HCAHPS Overall Hospital Rating and on the Outpatient SHEP Provider Rating.	Improve from FY13.	Improve from FY14.
		Fully implement Press-Ganey to determine baseline measure of patient satisfaction and address main opportunities for improvement.	Show improvement on Press-Ganey scores.	Outperform the Press- Ganey national benchmark in the majority of units, the majority of the time.



# **SAFETY**

The safety of our Veterans and workforce is essential every day.



# GOAL 6 Foster safety culture

MEASURE OF SUCCESS —

	OBJECTIVE	FY13	FY14	FY15
6.1	Physical & Psychological Safety Provide a physically and psychologically safe environment for all our patients, visitors, and workforce.	FY13 Organizational Goal Decrease the number of falls and assaults at VAPAHCS from FY12 levels – decrease inpatient fall rate to 3.5/1000 bed days of care, visitor and workforce falls by 10%, and all assaults by 10%.	TBD	TBD
		100% of workforce trained in Standards of Behavior.	TBD	TBD

### GOAL 7 Strengthen emergency preparedness

MEASURE OF SUCCESS —

	OBJECTIVE	FY13	FY14	FY15
7.1	Emergency Management Competency Train and prepare workforce to ensure safety	100% of functional areas attend emergency preparedness awareness training.	TBD	TBD
	and ability to provide support during times of crisis.	100% of services use hands-on checklist.	TBD	TBD



# **INNOVATION**

We embrace continuous learning, improvement, and research as fundamental to our ongoing success.



# GOAL 8 | Become a learning organization

----- MEASURE OF SUCCESS -

	OBJECTIVE	FY13	FY14	FY15
8.1	Continuous Improvement Develop a culture of continuous improvement.	FY13 Organizational Goal 100% of VAPAHCS leaders who attend process improvement training complete deliverables and engage front-line employees in continuous improvement.	TBD	TBD
		Develop and implement 12-month Evidence-Based Practice Fellow and Mentor Program and complete 5 practice innovation projects.	Increase enrollment by 100% and complete 10 practice innovation projects, 75% with interdisciplinary teams.	Increase enrollment by 100% and complete 10 practice innovation projects, 100% with interdisciplinary teams.

### GOAL 9 Enhance research program

\_\_\_\_\_ MEASURE OF SUCCESS

	OBJECTIVE	FY13	FY14	FY15
9.1	Research Program Management Ensure adequate resources to support a successful, growing program to fully meet our research mission.	Establish Research Space Committee to assess current space allocation and identify opportunities to improve on space efficiency.	Act on assessment findings to maximize existing space and develop plan for continued operation and expansion.	TBD
9.2	Genomics Research Center of Excellence Be at the forefront of genomics research in establishing an informatics center to promote Veterans' health through enhanced screening and diagnosis.	Complete demonstration project and formalize local collaborations to build foundation for establishing national Genomics Informatics site.	TBD	TBD



# STEWARDSHIP

Each of us carries the responsibility of ensuring the best use of our nation's resources in performing our duties.



### GOAL 10

### Align resources to deliver sustained value to Veterans

- MEASURE OF SUCCESS

	OBJECTIVE	FY13	FY14	FY15
10.1	Resource Allocation Be good stewards of our nation's resources to deliver the most value to our Veterans.	FY13 Organizational Goal 100% of services determine standard data to be reviewed and acted upon, incorporating practices of a data-driven organization, such as tracking and trending.	TBD	TBD
		100% of ERB requests submitted in A3 format.	TBD	TBD
		Reduce Non-VA Care expenditures by 5% from FY12.	Reduce Non-VA Care expenditures by 5% from FY13.	Reduce Non-VA Care expenditures by 5% from FY14.
10.2	Balanced Scorecard Implement performance tracking report to accelerate the achievement of health care system goals.	Pilot balanced scorecard with 50 supervisors.	Expand balanced scorecard to 100 supervisors.	100% of supervisors apply balanced scorecard.













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